

# CLAIMS ONLY

SERIAL NO. \_\_\_\_\_

FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	\$					
2						
3						
4						
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27						
28						
29						
30						
31	1					
32		1				
33		1				
34	1					
35		1				
36		1				
37		1				
38		1				
39	1					
40		1				
41		1				
42	1					
43	1					
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	4					
TOTAL DEP.	9					
TOTAL CLAIMS	13					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
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99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS